



HEDIS[®] and Clinical Quality Measures: The Basics

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Objectives

- Introduce key concepts used in clinical quality measurement
- Explain the use of HEDIS® measures across U.S. health plans and the AMEDD



How do we know? We measure.

Measure *n.* A standard: a basis for comparison; a reference point against which other things can be evaluated

- How do patients know if their healthcare is good care?
- How do providers pinpoint the steps that need to be improved for better patient outcomes?
- And how do insurers and employers determine whether they are paying for the best care that science, skill, and compassion can provide?

Performance measures give us a way to assess healthcare against recognized standards



What Is A Good Measure?

- Description of intent
- Documented description of population
- Defined data elements and allowable values
- Defined sampling procedure
- Specified calculation method
- Useful to healthcare organization
- Has face validity for clinicians



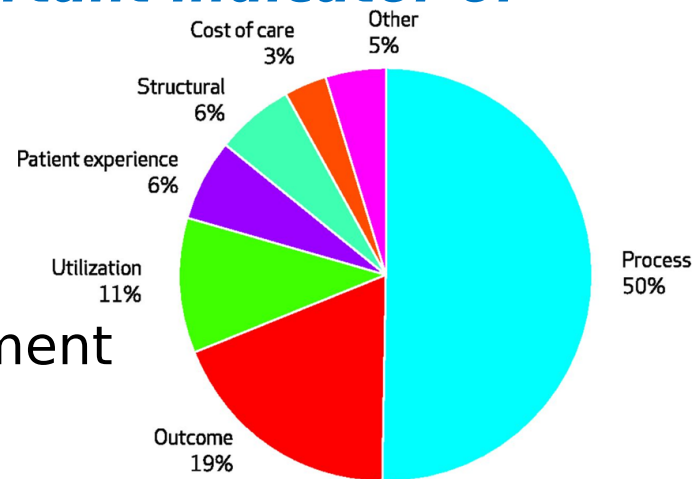


Performance Measure

Set of technical specifications that define how to calculate a “rate” for some important indicator of quality.

Examples:

- Advising smokers to quit
- Antidepressant medication management
- Breast cancer screening
- Cervical cancer screening
- Comprehensive diabetes care
- Controlling high blood pressure
- Children and adolescent access to primary care physician
- Children and adolescent immunization status
- Prenatal and postpartum care



Higgins A et al. Health Aff 2013;32:1453-1461

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HEDIS = Healthcare Effectiveness Data Information Set

- Precisely defined measures using standardized methodologies applied to a broad range of health conditions
- Administered by the National Committee for Quality Assurance (NCQA)
- Most widely used health care quality measurement tool in the United States (90% of all Health Plans)
- DoD does not submit data for NCQA public reports



www.ncqa.org



HEDIS[®] Commercial Percentiles

- NCQA offers quality data on clinical performance and patient experience for commercial health plan products, covering more than 100 million U.S. lives
- HEDIS[®] set specifies how organizations collect, audit, & report:
 - Dimensions of healthcare delivery
 - Customer satisfaction
 - Patient experience
- Relative percentile ranking of any score will change depending on each year's data that is submitted (which plans and how much each plan participates)





Percentiles

- Best described as a **comparison score**
- It is a measure of relative standing of an observation within a data set
- How many and how frequent the observations appear in the data set
- One of 100 equal parts of a series of measurements are arranged in order of their magnitude



Example: The 80th percentile is the value in the series below which over 79% of the values fall



Percentiles as Benchmarks

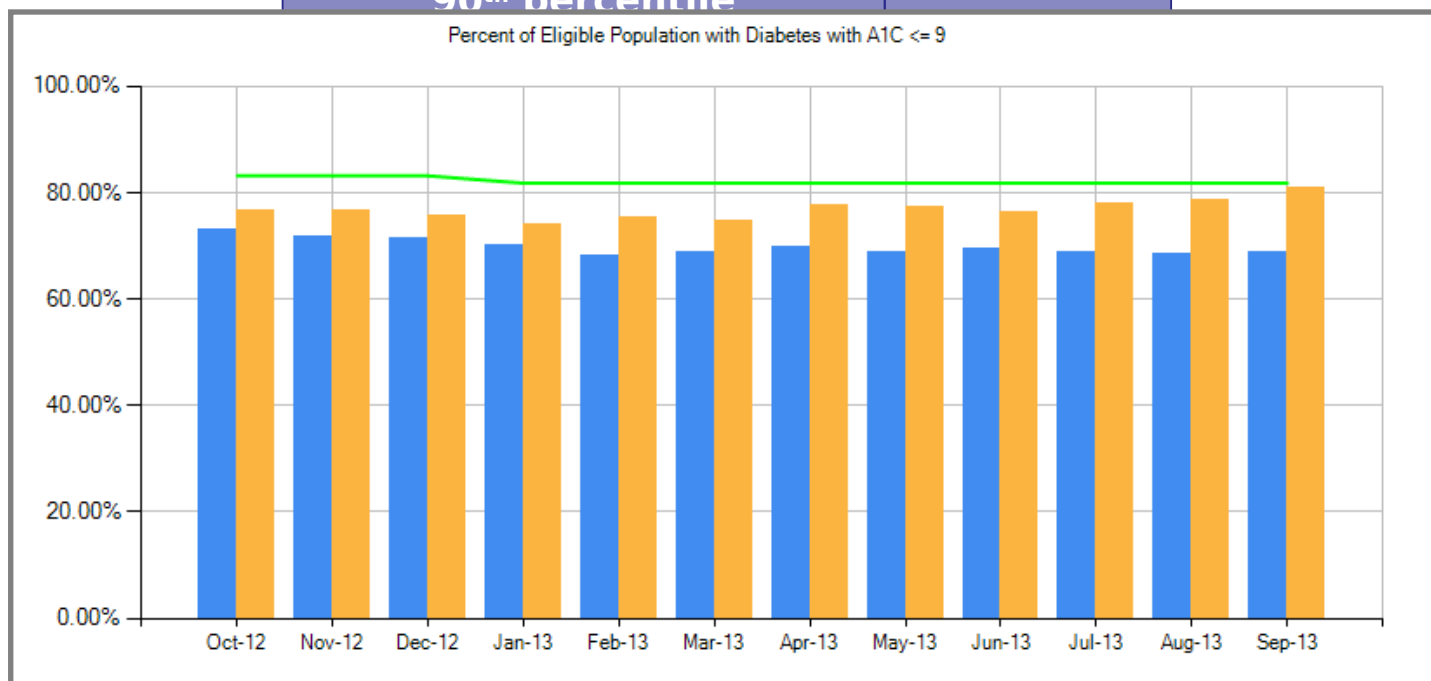
- Benchmarks indicate a standard of achievement or excellence against which similar things are measured or judged
- Comparing current performance with past performance is a method used to perform internal benchmarking. The data gathered from the analysis is used to improve future performance.
- Benchmark percentiles are not averages; they indicate an organization's best rate
- You cannot perform the same mathematical and statistical operations on percentiles that you can on raw scores





Using Percentiles

% Diabetics w/ A1c <= 9	Performance Level
MTF - A	68.8 %
MTF - B	80.9 %
HEDIS® Benchmark: 90 th percentile	81.8 %



MTF A
Blue
column

MTF B
Orange
column

2012 HEDIS® Benchmark for 90th percentile is indicated on the graph using the green trend line



HEDIS® Benchmarks

- If most scores are low, a relatively low score may be ranked as a high percentile
 - 90th percentile for Chlamydia Screening = 60.3%
 - So, 90 percent of all health plans submitting HEDIS® data had screened 60.3% of their patients following the measure definition

- If most scores are high, a relatively high score may be ranked as a low percentile
 - 50th percentile for diabetes HgbA1c = 94.7%
 - So, about half of all health plans submitting HEDIS® data had screened 94.7% of their patients following the measure definition



Advantages

- Used to measure **performance** on important dimensions of care and service
- Allows for standardized reporting
- Reports are used to:
 - Select a health plan (employers & consumers)
 - Conduct competitor analysis of health plans
 - Examine and compare quality improvement programs; along with accreditation information
 - Benchmark healthcare plan performance on a national level





Disadvantages

- HEDIS® measures do not account for many important aspects of health care quality
 - Numerous non-HEDIS interventions demonstrate some evidence of effectiveness; i.e., interventions to promote healthy behaviors
- Process to develop the measures is not completely "transparent"
 - Information about existing conditions, decisions and actions is not completely accessible, visible and understandable
 - HEDIS® measures are not considered standards of care, but act only as proxies for current EBM recommendations
 - Updates to measure definitions may not be timely and may not match current evidence based medicine guidelines



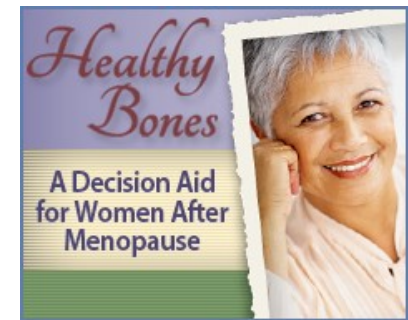
How the AMEDD Uses Reports

- TRICARE PRIME enrollees who meet criteria for HEDIS® measures are used to benchmark with commercial health plan performance. TRICARE PLUS reports are available also
- MHS has automated web tools to compare MTFs with other MTFs, as well as trending of local MTF performance using these clinical measures
- Strategy: Delivery of quality healthcare requires
Measurement **Accountability**
Transparency



How Measures Will Serve Our Future

- Measures are becoming both more precise and more complex
- Pay for performance / nonpayment for poor performance
- Health care reform legislation requires use of “patient-reported” measure sets
- In the public arena, reporting of measures will become clearer and easier for patients and their families to understand and use





Discussion





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HEDIS[®] Tool Kit

**U.S. ARMY MEDICAL DEPARTMENT**
Office Of Quality Management

HEDIS

[Basics](#)
[Outreach](#)
[Enrollment](#)
[Data Management](#)
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Methods and Approaches to Improving Clinical Measures

Welcome Clinical Measures Helpful Links Legacy MHSPHP Training CarePoint 3G Training

MHSPHP Metrics


Welcome to the Population Health Management Home Page

The menu on the left posts materials for the HEDIS Toolkit. There are reference materials used by local MTFs, such as samples of work practices to assist in effective use of standardized clinical quality measures (HEDIS) and initiatives in population health management. This collection of materials is not intended to be considered guidance or policy for primary care teams.

Reference and resource materials are being replaced periodically, so check back here for updates.

We welcome your comments on how to improve the information posted; please submit your feedback to our Web Master.

[Click here to join the HEDIS email distribution list.](#)



Click on the Shopping Cart to visit our on-line shopping system available to Army, Air Force and Navy facilities to replenish supplies of the Clinical Practice Guideline Tool Kits.

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Last Modified Date:
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<https://www.QMO.amedd.army.mil>



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National Quality Measures Clearinghouse

U.S. Department of Health & Human Services

AHRQ Agency for Healthcare Research and Quality
Advancing Excellence in Health Care

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NQMC National Quality Measures Clearinghouse

NQMC is a public resource for evidence-based quality measures and measure sets. NQMC also hosts the HHS Measure Inventory.

Search the site: **GO**

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The **HHS Measure Inventory**, a repository of measures separate from the NQMC, captures measures currently being used by the agencies of the U.S. Department of Health and Human Services for quality measurement, improvement, and reporting. Only some of the measures in the HHS Measure Inventory meet criteria for inclusion in the NQMC.

[Visit the HHS Measure Inventory](#)

Numerous clinical quality measures are tracked across US healthcare organizations. NQMC promotes use of evidenced-based quality measures.

<http://www.qualitymeasures.ahrq.gov/index.aspx>



National Quality Forum



NATIONAL
QUALITY FORUM

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About NQF

The National Quality Forum (NQF) is a nonprofit organization that operates under a **three-part mission** to improve the quality of American healthcare by:

- Building consensus on national priorities and goals for performance improvement and working in partnership to achieve them;
- Endorsing national consensus standards for measuring and publicly reporting on performance; and
- Promoting the attainment of national goals through education and outreach programs.

NQF's [membership](#) includes a wide variety of healthcare stakeholders, including consumer organizations, public and private purchasers, physicians, nurses, hospitals, accrediting and certifying bodies, supporting industries, and healthcare research and quality improvement organizations. The breadth and diversity of its membership allows NQF to be well positioned to maintain a constant drumbeat for healthcare quality. NQF's unique structure enables private- and public-sector stakeholders to work together to craft and implement cross-cutting solutions to drive continuous quality improvement in the American healthcare system.

<http://www.qualityforum.org>

NQF Endorsement:

Most developers put their measures through a rigorous process long before NQF considers them for endorsement. NQF's careful review and assessment gathers input from stakeholders across healthcare groups and develops consensus among those stakeholders about which measures warrant endorsement as the "best in class."